International Students' Navigating Challenges in a Vietnamese English-Medium Instruction Program: Self-Determination and Resilience Perspectives

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Abstract. This study explores the academic, linguistic, cultural, and social challenges faced by international medical students enrolled in an English-Medium Instruction (EMI) program in Vietnam, as well as the strategies they employed to adapt and succeed. Fourteen students participated in semi-structured interviews, providing qualitative insights into their lived experiences. Findings revealed that participants encountered considerable academic difficulties, including the complexity of medical terminology, fast-paced lecture delivery and teaching methods that were unfamiliar compared to their home countries' education systems. Language barriers not only hindered academic comprehension but also affected classroom participation and social integration. Cultural challenges, such as adjusting to indirect communication styles and hierarchical classroom dynamics, further complicated their adaptation process. Nevertheless, students demonstrated resilience through coping mechanisms such as self-directed learning, peer collaboration, time management and engagement with institutional resources. Notably, they reported significant personal growth, including increased independence and intercultural competence. However, the study also identified gaps in institutional support, particularly in terms of faculty members' limited intercultural teaching skills and responsiveness to international students' needs. Recommendations included the development of tailored language

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support programs, culturally responsive pedagogy, peer mentorship initiatives and accessible mental health services. By focusing on the Vietnamese context, this research contributes to the understanding of EMI experiences in the Global South and offers practical implications for enhancing international medical education in non-western settings.

1. Introduction

The worldwide expansion of EMI programs in higher education has become a defining trend in the twenty-first century (Dearden, 2014; Macaro et al., 2018). As universities worldwide strive to attract diverse student populations and enhance their global competitiveness, EMI programs have proliferated across disciplines, including business, engineering and the health sciences. Among these, medical education has witnessed a significant rise in EMI offerings, reflecting the need to prepare future healthcare professionals for an interconnected and multicultural world (Galloway & Rose, 2015; Wilkinson, 2012).

Vietnam has increasingly positioned itself as a significant site for EMI program development, especially in medical education. This growth reflects strategic national efforts to internationalize higher education, enhance institutional competitiveness and attract foreign students through English-taught programs, all of which align with broader educational reforms aimed at global integration (Nguyen et al., 2017). Vietnamese medical institutions have increasingly adopted EMI to attract international students, promote academic collaboration, and improve the international ranking of their programs (Communist Party of Vietnam, 2024). Though more EMI programs are open in Vietnamese institutions, there are few insights into how overseas students experience and evaluate these educational environments, especially in specialized fields such as medical education.

International students in EMI contexts across the Global South, such as Vietnam, encounter unique challenges that differ from those faced by their counterparts in Western institutions. These challenges stem from the intersection of linguistic, cultural and academic factors, with language proficiency and comprehension of technical medical terminology being particularly critical in medical education, as they directly impact clinical communication, diagnostic accuracy, and academic success (Galloway & Rose, 2015). While EMI programs aim to provide equitable learning opportunities, the reality often involves navigating language barriers, adapting to unfamiliar pedagogical approaches, and coping with cultural differences—such as variations in classroom hierarchy, norms around student participation and communication styles—that affect both classroom dynamics and social integration (Doiz & Lasagabaster, 2020).

Existing research on EMI in Asia has primarily focused on countries with well-established international education systems, such as China, Japan, and South

Korea (Kim, 2017; Macaro et al., 2018; Rose & McKinley, 2018). These studies have explored various dimensions of EMI, including teaching quality, administrative support, language proficiency and student satisfaction. However, there is a noticeable gap in the literature regarding the experiences of international students in Vietnam, particularly in the context of medical education.

Addressing this research gap is crucial for several reasons. First, international students play a significant part in enhancing the academic and cultural diversity of Vietnamese institutions and gaining insights into their experiences can inform policies and practices that enhance student support and academic success (Hoang et al., 2018). Second, the medical field presents distinct challenges due to its rigorous curriculum, clinical training requirements, and the necessity for precise communication in healthcare settings (Wilkinson, 2012). These factors may exacerbate the issues encountered by international students, making it essential to examine their academic, linguistic, cultural and social adaptation processes.

The study was directed by the following questions:
> RQ1. What challenges do international students face in their medical EMI program at a university in Vietnam?
> RQ2. What strategies do international students employ to navigate the challenges of studying in this program?

2. Literature Review
2.1. International Students' Challenges in EMI Classes
EMI has become a significant phenomenon in worldwide higher education, reflecting the growing prominence of English as a universal medium in academia, business and international communication. EMI denotes the approach of using English to teach academic disciplines in nations in which English is not the primary language (Dearden, 2014). This approach aims to enhance students' English proficiency while providing access to international knowledge and enhancing global competitiveness (Macaro et al., 2018). The expansion of EMI is driven by the growing demand for internationalization in higher education, economic globalization, and the strategic goal of many institutions to attract international students (Doiz & Lasagabaster, 2020).

Globally, the adoption of EMI has been particularly pronounced in Europe, Asia and the Middle East. In Europe, initiatives such as the Bologna Process have played a central role in promoting EMI by encouraging the standardization of higher education systems and the use of English to enhance comparability, quality assurance, and student mobility across member countries (Molino et al., 2022). In Asia, China, South Korea, and Japan have rapidly expanded EMI programs to enhance their global academic reputation and attract international talent (Galloway & Rose, 2015; Kim, 2017). The rationale for implementing EMI programs varies significantly across contexts. In some cases, institutions adopt EMI to enhance their international visibility and attract international students as a source of revenue. Others are motivated by national education reforms aimed at improving graduates' competitiveness in the global job market or aligning with international academic standards. Additionally, universities may see EMI as a

strategy to increase their position in global rankings or to facilitate academic partnerships and research collaboration across borders (Bowles & Murphy, 2020). EMI also aligns with labor market demands, as English proficiency is often associated with better employment opportunities and career advancement in the global economy (Bowles & Murphy, 2020). Furthermore, EMI can contribute to the development of intercultural competence, preparing learners for effective work in multicultural environments (Phuong & Nguyen, 2019).

One of the most prominent academic challenges faced by international students in EMI programs is language proficiency. Despite having met language requirements for admission, many students struggle with the academic use of English, particularly in disciplines that involve complex terminologies and abstract concepts (Bolton et al., 2024; Bolton & Botha, 2020). Academic tasks such as understanding lectures, engaging in classroom discussions, reading dense academic texts and producing scholarly writing often demand more advanced language proficiency than everyday conversational English. This proficiency gap can hinder comprehension, limit classroom engagement, and negatively impact academic performance (Galloway & Rose, 2015; My & Nguyen, 2024; Thinh, 2025).

Furthermore, differences in teaching methods pose additional challenges. EMI programs often employ pedagogical approaches that may differ significantly from the educational practices students are accustomed to in their home countries (Macaro et al., 2018; Zumor & Qasem, 2019). For instance, Western-style EMI programs often emphasize critical thinking, student-centered learning and active participation, which may present challenges for some students—particularly those whose prior educational experiences emphasized rote memorization and teacher-led instruction (Lasagabaster & Fernández-Costales, 2024). This pedagogical shift requires students to adapt not only to new content but also to new ways of learning, which can be overwhelming without adequate support. Curriculum complexity further compounds academic challenges. EMI programs, especially in specialized fields such as medicine, engineering and business, often feature rigorous curricula that demand high levels of analytical thinking, problem-solving skills, and practical application of knowledge (Evans & Morrison, 2011).

Cultural adaptation is another significant challenge for international students in EMI programs. Adjusting to local norms, values and social customs can be a complex process, particularly when these differ markedly from students' home cultures (Sawir et al., 2008; Zhou et al., 2008). Classroom culture, in particular, often reflects broader societal norms, and international students may find it challenging to navigate expectations around classroom behavior, student-teacher interactions, and peer relationships (Thinh, 2025; Zumor & Qasem, 2019). Classroom culture can include implicit norms such as the degree of formality in addressing professors, expectations around classroom participation, and attitudes toward academic authority and independence (Le & Nguyen, 2023; Phuong & Nguyen, 2019). For instance, learners from cultures grounded in collectivism may hesitate to express dissenting opinions or challenge ideas in class, fearing it may be perceived as disrespectful. In contrast, EMI programs often encourage debate and critical questioning, which can be intimidating for those unaccustomed to

such practices (Marginson, 2014). Social integration outside the classroom also presents challenges. International students often experience difficulties in forming friendships with local students, partly due to language barriers and cultural differences (Makeeva et al., 2021). Social networks play a crucial role in academic success and psychological well-being, providing emotional support, academic collaboration and a sense of belonging. Limited social integration can lead to feelings of isolation and homesickness, further complicating the adaptation process (Sawir et al., 2008).

The social and psychological challenges faced by international students are deeply interconnected with academic and cultural adaptation issues. Feelings of isolation and loneliness are common, particularly in the early stages of adjustment (Sawir et al., 2008; Tuan, 2025; Zhou et al., 2008). The absence of familiar support systems—family, friends and cultural communities—can exacerbate stress and contribute to anxiety issues such as anxiety and depression (Hofhuis et al., 2023; Makeeva et al., 2021).

2.2. Adaptation Strategies in EMI Contexts

International students often face academic challenges in EMI contexts, necessitating effective coping mechanisms to achieve academic success. One common strategy is the utilization of academic support resources, such as tutoring services, study groups and academic workshops. These resources help students enhance their understanding of course materials and develop critical thinking skills essential for academic achievement (Bowles & Murphy, 2020). Language improvement strategies play an important role for many international students in EMI programs, particularly those who face challenges in academic English or local language proficiency. Proficiency in academic English is critical, not only for understanding lectures and reading academic texts but also for participating in discussions and writing assignments. Students often engage in self-directed learning activities, such as extensive reading, vocabulary development and language exchange programs, to improve their language skills (Barrios et al., 2022; Lasagabaster & Fernández-Costales, 2024). Participation in language workshops and supplementary English courses offered by universities further supports language development (Sert, 2008). Social networking plays a crucial role in the adaptation process. However, building connections with peers—whether from similar cultural backgrounds or diverse international communities—can be hindered by language barriers, cultural misunderstandings and occasional feelings of discrimination or isolation. Despite these challenges, such relationships remain vital for emotional support and successful cultural adjustment. Social networks offer platforms for sharing experiences, exchanging academic resources and developing a sense of belonging, which is vital for psychological well-being (Brunsting et al., 2021; Zhou et al., 2008). Engagement in extracurricular activities and student organizations also supports social integration and helps students build resilience against the stressors associated with studying in a foreign environment.

Institutional support is a critical factor contributing to foreign students' successful adaptation in EMI programs. University counseling centers offer individual and

group counseling sessions, workshops on stress management, and peer support programs to help students navigate these challenges (Makeeva et al., 2021; Sawir et al., 2008; Smith & Khawaja, 2011). Language courses tailored for academic purposes are another vital form of institutional support. These courses focus on developing the language skills necessary for academic success, including academic writing, presentation skills and discipline-specific vocabulary. Such targeted language support helps bridge the gap between students' general English proficiency and the specific demands of EMI programs (Evans & Morrison, 2011; Galloway & Rose, 2015). Mentorship programs, where international students are paired with faculty members, senior students or alumni, can offer personalized guidance and support; however, their effectiveness may vary depending on factors such as mentor-mentee compatibility and the structure of the program. Mentors offer academic advice, career counseling and emotional support, helping mentees set goals, develop strategies for academic success, and navigate the cultural differences of the host country (Kutsyuruba & Godden, 2019). These programs also create opportunities for professional networking and community building within the university.

2.3. Research Gap

While there is a growing body of literature exploring EMI in higher education, much of the existing research has concentrated on contexts within Western countries or in regions where EMI has been well-established for decades. Studies have extensively investigated the academic difficulties faced by international students, including language barriers, curriculum demands, and cultural adaptation issues (Bowles & Murphy, 2020; Macaro et al., 2018). Research has so far highlighted various coping mechanisms and adaptation strategies employed by international students, such as language improvement practices, social networking, and the role of institutional support (Makeeva et al., 2021).

Research on EMI classrooms in Western countries is well-documented in the literature. However, those in ASEAN region are still under-represented, especially in specialized fields like medical education; however, empirical studies examining how international students navigate academic and cultural challenges in this unique environment need to be richer. Most studies tend to focus on domestic students' experiences in EMI programs (Doiz & Lasagabaster, 2020; Macaro et al., 2018), overlooking the distinct perspectives of international learners who face additional layers of complexity related to cross-cultural adaptation and language proficiency.

While previous studies on Vietnamese EMI have highlighted concerns related to the insufficient English proficiency of both students and instructors (Nguyen et al., 2017, 2025), challenges in active learning participation (Pham & Doan, 2020), and reliance on rote memorization due to language barriers (Yao et al., 2022), these studies predominantly focused on local students. International students studying medicine in EMI settings face additional challenges beyond language, including differences in pedagogical expectations, difficulties in clinical practice due to limited Vietnamese language skills, and social integration struggles with both domestic students and faculty (Nguyen et al., 2017; Tran & Nguyen, 2018).

Additionally, EMI medical programs in Vietnam often rely on non-native English speaker faculty members, leading to potential inconsistencies in teaching quality and communication barriers between instructors and students (Dung, 2024; Tran & Nguyen, 2018). These structural challenges are further compounded by cultural adjustment difficulties, as international students in Vietnam must navigate not only an unfamiliar academic system but also distinct cultural norms that shape classroom engagement and social interactions (Tran & Nguyen, 2018; Yao et al., 2022).

Furthermore, while some research has explored the general challenges faced by international students—such as language barriers, cultural adjustment and academic workload—few studies have examined the specific coping and adaptation strategies that students adopt to navigate these challenges, particularly in the Vietnamese context. The subtle interplay between academic expectations, cultural norms and social integration processes remains insufficiently studied. Moreover, there is a noticeable gap in evaluating the effectiveness and responsiveness of institutional support services—such as language assistance, counseling and academic advising—especially within medical EMI programs, where the intensity and complexity of training place heightened demands on international students.

In response to these gaps, this study attempted to examine the difficulties faced by international students participating in a medical EMI program at a Vietnamese university and to identify the strategies they use to adapt to these challenges. This study aspired to contribute further understanding of foreign students' experiences in EMI programs in Vietnam, thereby enriching the broader discourse on EMI in higher education around the world.

2.4. Theoretical Framework
To provide a stronger theoretical foundation for understanding international students' experiences in EMI programs, Self-Determination Theory (SDT) and Resilience Theory offer valuable insights into the factors that influence student motivation, adaptation and persistence in academic environments. These frameworks help explain how students develop the autonomy, competence and emotional strength needed to overcome linguistic, cultural and academic challenges in non-Western EMI settings. Importantly, these theories also allow for consideration of individual differences—such as personality traits, socioeconomic background and prior exposure to English—which shape how students experience and respond to these challenges. Integrating SDT and resilience theory thus offers a varied understanding of the diverse pathways through which students navigate their educational journeys.

2.4.1. Self-determination in EMI contexts
SDT, developed by Ryan and Vansteenkiste (2023), emphasizes three fundamental psychological needs that drive motivation and learning: autonomy, competence and relatedness. In EMI programs, these factors play a crucial role in student success. Research suggests that students who feel a sense of autonomy in their academic choices and study strategies tend to be more engaged and persistent in learning, while competence is essential in adapting to complex

medical curricula and linguistic barriers (Bälter et al., 2024). Additionally, relatedness – developed through peer interactions, faculty support and institutional engagement – enhances students' academic and social adjustment (Ushioda, 2016).

2.4.2. Resilience perspectives in EMI contexts
In parallel, resilience theory provides a framework for understanding how students cope with adversity, manage stress, and adapt to new cultural and academic environments (Masten, 2014). Resilience in EMI students is shaped by both individual factors (e.g., emotion, emotional regulation, self-efficacy) and external factors (e.g., institutional support, peer networks, faculty inclusivity). Research indicates that resilience is particularly critical for international students who face language barriers, cultural adjustment issues and unfamiliar educational expectations, as it enables them to persist despite initial struggles (Bälter et al., 2024).

Integrating these theories into EMI research is essential for understanding the motivational and psychological dimensions of student adaptation. SDT highlights the importance of developing autonomy, competence and supportive learning environments, while resilience theory underscores the role of emotional adaptability and institutional support in student success. These perspectives align with existing EMI literature, which stresses the need for inclusive teaching strategies, culturally responsive pedagogy, and targeted student support programs (Nguyen et al., 2016).

3. Methodology
3.1. Research Design
This research used a qualitative design to investigate the challenges encountered by international students and the strategies they employ to adjust within a medical EMI program in Vietnam. A qualitative methodology was deemed most suitable for capturing the depth and complexity of students' lived experiences, allowing for a refined exploration of personal narratives, cultural adaptation and emotional responses. Semi-structured interviews were used as the primary data collection method, offering both structure and flexibility to probe individual perspectives in depth. While a mixed-methods or quantitative approach could offer broader generalizability, the qualitative focus of this study enabled a rich, context-specific understanding of how students interpret and navigate their academic and social environments.

3.2. Research Setting and Participants
The study was conducted in a medical university in Vietnam. The university started its EMI program in General Medicine in 2022 which has enrolled around 200 international students.

This program marked the first instance of a Vietnamese medical university accommodating a substantial group of international students, highlighting the growing presence in the worldwide education landscape in Vietnam. The program served as a bridge across linguistic and cultural boundaries, promoting

a diverse academic environment while supporting the broader goal of strengthening the integration of global education. The international students, for whom English is a second language (ESL), engaged in a distinctive learning environment where Vietnamese lecturers and staff use English as a foreign language (EFL)—a dynamic that may influence the clarity of instruction, classroom communication and ultimately, students' academic outcomes. The six-year program these Indian students enroll was offered entirely in English.

To be eligible for admission, candidates had to hold a high school diploma in which the scores of physics, chemistry and biology had to be at least 50%. Additionally, students must pass the entrance exam set by the university, which consists of multiple-choice questions from physics, chemistry and biology. The admission process typically began in June and extended until September, with applications submitted online through the university's official platform. Since the program was taught entirely in English, students were required to demonstrate proficiency in the language. Indian students, who have studied English as a core subject since childhood, generally possess a sufficient command of the language, with an estimated 60-80% of them exhibiting a strong level of English proficiency. Some students might also be required to submit English proficiency test scores, such as International English Language Testing System (IELTS) or Test of English as a Foreign Language (TOEFL), as part of their application process.

The participants in this study consisted of 14 international medical students enrolled in the university's EMI program, all of whom were Indian nationals. The sample included six female students (42.9%) and eight male students (57.1%). While limited to one nationality, this sample reflects the actual demographic composition of the current international student population at the research site. As this study aimed to gain in-depth, context-specific insights into students' lived experiences, the selected participants were considered appropriate for capturing shared challenges and adaptation strategies within this particular cohort. The participant profile is presented in Table 1.

Table 1: Demographics of participants

No	Pseudonym	Nationality	Sex	Current year of study
1	S1	Indian	F	Second year
2	S2	Indian	F	Second year
3	S3	Indian	F	Second year
4	S4	Indian	M	Second year
5	S5	Indian	M	Second year
6	S6	Indian	M	Third year
7	S7	Indian	M	Third year
8	S8	Indian	F	Second year
9	S9	Indian	F	Third year
10	S10	Indian	M	Third year
11	S11	Indian	M	Second year
12	S12	Indian	M	Second year
13	S13	Indian	F	Third year
14	S14	Indian	M	Second year

Regarding academic standing, nine participants (64.3%) were in their second year of study (64.3%), while five participants (35.7%) were in their third year. This selection provided a range of perspectives, capturing both the experiences of relatively new students and those who had spent more time adapting to the program and environment. Participants were recruited through purposive sampling to ensure they had relevant experiences related to the research questions.

3.3. Data Collection and Instrument
Data was collected via semi-structured interviews in English. The interview protocol was designed based on the research questions, covering areas such as academic challenges, language and communication issues, cultural adaptation, social integration, support services, financial and practical challenges and coping strategies. Each interview duration was estimated to range from 45 to 60 minutes and was executed within a private setting to ensure a confidential environment and comfort for the respondents.

Ethical considerations throughout the data collection process were practiced. Prior to conducting interviews, informed consent was secured from all participants, ensuring they were aware of the confidentiality of their responses and that their involvement was voluntary. Participants also kept informed of their choice to withdraw from the study at any stage without facing any repercussions. With participants' permission, the interviews were audio-recorded to guarantee the accuracy of transcription and subsequent analysis.

3.4. Data Analysis
Interview data were transcribed verbatim to capture the participants' exact words, and transcripts were cross-checked against the audio recordings to ensure accuracy. A thematic analysis approach (Clarke et al., 2015) was used to identify, analyze, and report patterns (themes) within the data. Thematic analysis is a qualitative research method used to systematically identify recurring themes across datasets, allowing researchers to interpret participants' experiences in a structured manner. In this study, the coding process was conducted manually without the use of qualitative analysis software. The analysis followed the six steps of Clarke et al.'s (2015) framework: becoming familiar with the data through repeated reading of transcripts; generating initial codes by identifying key phrases and concepts relevant to the research questions; grouping these codes into broader themes; reviewing themes for coherence; refining and defining the themes; and finally, integrating the analytic narrative with supporting data extracts to construct a comprehensive report.

4. Findings
To synthesize and present the key themes emerging from the semi-structured interviews, the findings are organized into three tables corresponding to the main areas of inquiry: challenges, coping strategies and recommendations. Table 2 outlines the academic, linguistic, social and institutional challenges faced by international medical students. Table 3 summarizes the strategies these students employed to navigate and adapt to these challenges, highlighting both individual

and peer-based approaches. Table 4 presents student-generated recommendations aimed at improving the effectiveness and inclusivity of the EMI medical program, focusing on institutional support, faculty development and student well-being.

Table 2: Challenges Faced by International Medical Students in EMI Programs

Domain	Challenges Identified by Students
Academic	• Difficulty understanding complex medical terminology (especially Latin and Greek roots) • Adapting to new teaching methods (e.g., case-based, student-centered learning) • Struggles with dense content in textbooks and lectures
Linguistic	• Understanding fast-paced lectures or professors with strong local accents • Academic writing and oral presentations • Limited confidence in using English for academic and clinical purposes
Social/Cultural	• Adjusting to Vietnamese classroom norms and indirect communication • Differences in educational expectations and social customs • Challenges forming friendships beyond the international student group
Institutional	• Limited responsiveness of support services to international student needs • Financial stress (tuition and living expenses) • Practical issues with housing, healthcare and transportation

Table 3: Coping Strategies Used by International Medical Students in EMI Programs

Domain	Coping Strategies
Academic	• Self-directed learning and structured study schedules • Participation in peer-led study groups • Time management practices
Linguistic	• Practicing medical and academic English • Learning basic Vietnamese for clinical communication • Using translation apps
Social/Cultural	• Joining university events and cultural activities • Building peer networks across cultures • Adapting to local norms
Institutional	• Using counseling and academic advising services • Seeking help from approachable faculty • Engaging with student support offices

Table 4: Recommendations for Improving the EMI Medical Program

Domain	Student Recommendations
Academic Support	• Introduce specialized language courses, especially in Vietnamese medical terminology • Provide workshops on academic writing and medical English
Faculty Development	• Offer training in culturally responsive teaching methods • Encourage more engagement during clinical practice
Social and Cultural Integration	• Organize orientation programs covering academic and cultural expectations • Promote cultural exchange events and student mixers
Peer and Mentorship Support	• Establish peer mentorship programs pairing international students with senior or local students
Mental Health Services	• Expand counseling services and workshops on stress, homesickness and emotional resilience
Practical Assistance	• Provide affordable housing options and clear guidance on navigating local healthcare and transportation systems
Career Development	• Offer career counseling, internship placement support and academic partnership opportunities

4.1. Challenges Encountered by the Students in EMI Classes

4.1.1. Academic and linguistic challenges

The analysis of interviews with 14 international medical students studying in Vietnam revealed several key academic challenges related to both content mastery and language barriers. These challenges were interconnected, influencing students' academic performance, classroom engagement and clinical preparedness.

One of the academic challenges from the interviews was associated with the understanding complex medical terminology, along with dense course content. Students expressed difficulties in grasping advanced medical concepts, especially those embedded in scientific jargon derived from Latin or Greek. These linguistic challenges often created barriers to effective learning and retention. Students expressed concerns about the specialized nature of medical vocabulary, which required significant effort to learn, understand and recall. For instance, S1 described the difficulty of adapting to the language demands of medical studies:

> "*Studying medicine in English has been challenging in terms of understanding complex medical terminology and adapting to academic writing and communication standards.*" (Student 1, 2nd-year student)

Similarly, S3 noted these difficulties, emphasizing the overwhelming nature of memorizing and applying medical terminology in coursework:

> "*Medical terms are highly specialized, and learning, understanding and remembering them can be overwhelming.*" (Student 3, 2nd-year student)

This struggle was not only limited to theoretical learning but also extended to dense, information-heavy textbooks and lecture materials. The difficulty was

further compounded when students had to apply these terms in written assignments and clinical case reports. S2 highlighted the cognitive burden associated with both reading and writing in the EMI context:

> *"Textbooks often contain dense information, requiring extra effort to simplify and retain. Assignments like writing clinical case reports in English were also challenging, especially when precise medical language was needed."* (Student 2, 2nd-year student)

Such challenges indicated that while the EMI framework supports content delivery, the linguistic complexity inherent in medical studies adds an additional cognitive load for international students. To bridge this gap, students expressed a need for more structured language support focusing on medical terminology, academic writing and communication skills in order to improve their comprehension and performance in an EMI environment.

Students reported difficulties in following lectures and comprehending textbooks and assignments, particularly when instructors used fast-paced English or had strong accents. Given the technical nature of medical education, students found it challenging to keep up with dense content delivered rapidly in English. S7 elaborated on this issue:

> *"Lectures are often fast-paced and filled with complex medical jargon, making it difficult to follow in real-time."* (Student 7, 3rd-year student)

This sentiment was echoed by S13, who stated that the difficulty of understanding course materials due to the complexity of both medical terminology and the specific language used in textbooks and assignments.

> *"Understanding lectures, textbooks and assignments can be challenging due to complex medical terminology and nuanced language."* (Student 13, 3rd-year student)

Another significant challenge involved adapting to different teaching methodologies. Students coming from diverse educational backgrounds found the Vietnamese EMI program's instructional style to be both novel and demanding. For example, S2 described how the emphasis on practical, hands-on learning differed from their previous, lecture-heavy education system:

> *"The teaching methods here are more focused on practical, hands-on learning compared to my previous education, which was lecture-heavy."* (Student 2, 2nd-year student)

Similarly, S3 found the transition to case-based learning and interactive discussions initially difficult, as it contrasted with a memorization-heavy approach in their prior studies:

> *"The emphasis on case-based learning and interactive discussions was initially challenging because I was used to rote memorization."* (Student 3, 2nd-year student)

While some students appreciated the shift toward student-centered learning, they also found it difficult to transition from their prior academic cultures. S11 shared the challenge of adapting to self-directed learning expectations:

> "*In India, we had more direct instruction, whereas here, we are expected to engage in self-directed learning, which took time to adjust to.*" (Student 11, 2nd-year student)

Although most students acknowledged that professors were generally approachable, there were mixed experiences regarding the accessibility and effectiveness of academic support. Some students found faculty members supportive and willing to assist, while others reported language barriers and time constraints as obstacles to effective communication, as S4 and S9 stated:

> "*Professors are generally accessible and approachable, offering guidance when sought.*" (Student 4, 2nd-year student)

> "*Some professors are friendly and supportive, but language barriers and busy schedules can limit effective communication.*" (Student 9, 3rd-year student)

Regarding clinical preparation, students expressed both satisfaction and concerns. For instance, S6 expressed satisfaction with the early clinical exposure but noted the need for more practice opportunities:

> "*The program does well in preparing us for clinical work with early exposure, but more hands-on practice would enhance our readiness.*" (Student 6, 3rd-year student)

Conversely, S10 highlighted the importance of increased engagement with professors during clinical training to enhance practical skills:

> "*More engagement with professors in clinical settings could improve practical skills.*" (Student 10, 3rd-year student)

The level of confidence in using English for academic purposes varied among students. While some felt reasonably confident, others struggled, particularly with academic writing and oral presentations. S1 expressed a moderate level of confidence but acknowledged the difficulty of expressing complex ideas in academic contexts:

> "*I feel reasonably confident using English for academic purposes, though expressing complex ideas in assignments or exams can still be daunting.*" (Student 1, 2nd-year student)

Similarly, S5 noted that while their overall English proficiency was strong, medical terminology remained a significant challenge:

> "*I feel quite confident in using English, but medical terminology can still be challenging.*" (Student 5, 2nd-year student)

Communication challenges extended beyond academic tasks to interactions with professors and peers, particularly due to accent differences and language barriers. Many students reported that understanding instructors with strong Vietnamese accents was a major challenge. S7 and S12 shared their difficulties in following lectures due to accent-related comprehension:

> "*Some professors have strong Vietnamese accents, making lectures harder to follow.*" (Student 7, 3rd-year student)

> "*We build better communication with the staff who are proficient in English, but some accents are quite difficult to understand.*" (Student 12, 2nd-year student)

These language-related issues also affected peer interactions, particularly with local Vietnamese students. Some international students reported that language barriers limited social interactions, making it difficult to integrate beyond their international student community.

> "*It's difficult to connect with local students beyond the international community due to language barriers.*" (Student 8, 2nd-year student)

Language barriers significantly influenced both academic performance and social integration. S3 and S9 explained:

> "*Language barriers slow down learning, especially when understanding complex medical terminology or participating in class discussions.*" (Student 3, 2nd-year student)

> "*Language barriers affect not just academics but also relationships with lecturers, the university and Vietnamese students.*" (Student 9, 3rd-year student)

These results suggest that for international learners enrolled in EMI medical programs, language proficiency becomes crucial to both academic achievement and social adjustment. Addressing these challenges through enhanced language support, clearer lecture delivery and opportunities for intercultural interaction could significantly improve students' overall experience.

4.1.2. Cultural adaptation and social integration challenges
International medical students often face a range of cultural adaptation challenges when transitioning to a new academic and social environment. In this study, participants shared their experiences regarding cultural differences in Vietnam and their impact on both academic and personal life. Many students highlighted the differences in social norms, communication styles and educational expectations, which influenced their overall adaptation process.
For example, S1 noted:

> "*Adapting to the new educational system, language barriers and cultural differences were the biggest challenges upon joining the program. These impacted my learning experience by initially making it harder to keep up with the pace of classes and understand the expectations.*" (Student 1, 2nd-year student)

Similarly, S3 mentioned their struggles with daily routines and local customs, which affected their comfort and adjustment:

> "*Initially, I struggled with differences in social norms and daily routines, such as food choices, local customs and communication styles.*" (Student 3, 2nd-year student)

The classroom environment posed its own set of challenges. Several participants discussed the hierarchical relationship between professors and students, which differs from the more informal and interactive styles they were habituated to their home countries. S2 observed the challenge of adapting to the indirect communication style prevalent in Vietnamese classrooms:

> "*One challenging cultural norm was the emphasis on indirect communication in the classroom. While I am used to being more direct in asking questions, adapting to this more reserved style initially made it difficult to engage actively.*" (Student 2, 2nd-year student)

Similarly, S9 noted that in Vietnam, students are generally less likely to challenge or question professors, which contrasts with the more interactive and discussion-driven classrooms in India:

> "*Professors are highly respected, and students rarely challenge or question them in class, unlike in India, where classroom discussions are often more interactive and informal.*" (Student 9, 3rd-year student)

These findings imply that international students had to adjust their classroom engagement strategies, shifting from active questioning and debate to a more reserved and formal style of interaction. This transition sometimes led to reduced participation and hesitancy in academic discussions.

Integration into the broader university culture and local community proved to be a gradual process for many students. S4 shared their initial hesitation to participate fully due to these challenges:

> "*Integrating into the local community and university culture has been a gradual process. Language barriers, differing social norms and unfamiliarity with traditions sometimes made me hesitant to participate fully.*" (Student 4, 2nd-year student)

S6 expressed similar sentiments:

> "*The language barrier has made it challenging to interact with local students and fully immerse myself in the Vietnamese social scene.*" (Student 6, 3rd-year student)

While the academic environment posed challenges, many students had positive interactions with both local students and faculty. S5 reflected their positive experiences with both local peers and professors:

> "*My interactions with local students and faculty have been positive overall. Local students are friendly and willing to help, while faculty members are approachable.*" (Student 5, 2nd-year student)

Support systems within the university were instrumental in facilitating students' adjustment to their new environment. Some students felt supported by the institution, particularly through language support and counseling services. S10 stated:

> "*Yes, I do feel supported by the university and my peers, though there are challenges. The university offers resources like language support and*

counseling for international students, which has been helpful." (Student 10, 3rd-year student)

Conversely, S12 mentioned gaps in support:
"The university provides resources like academic advising and language support, but there are occasional gaps in understanding the unique challenges faced by international students." (Student 12, 2nd-year student)

Forming social networks was reported as both a challenge and an area of gradual improvement. S7 explained:
"Building a social network in Vietnam has been moderately challenging. While some local students are welcoming, forming close bonds takes time due to cultural and language differences." (Student 7, 3rd-year student)

On the other hand, S14 noted a more positive experience, attributing their social integration to university events and student groups:
"Building connections has been easier through university events and student groups, though language differences still play a role." (Student 14, 2nd-year student)

Feelings of inclusion varied among participants. S11 shared:
"I feel somewhat included in group activities, study sessions and social events, but there are moments of isolation, especially when language becomes a barrier." (Student 11, 2nd-year student)

In contrast, S13 described a more inclusive environment, noting that peers were welcoming and collaborative:
"For the most part, I feel included in group activities, study sessions and social events. Peers are generally welcoming, and I've participated in several collaborative projects and gatherings." (Student 13, 3rd-year student)

These findings indicated that social integration is a complex process that varies across students. While some find it challenging to build connections, others actively engage in university-led initiatives that enhance inclusivity.

4.1.3. Institutional support and everyday challenges
International students reported varying levels of satisfaction with the assistance services offered by their university. While some found these services helpful, others noted areas for improvement, particularly in cultural integration and practical assistance.

Many students acknowledged the availability of academic advising, language support and counseling services. S1 described these services as effective but emphasized the need for better-tailored counseling programs to address the exclusive challenges encountered by international students:
"The university offers academic advising and basic language support, which have been somewhat helpful. However, counseling services could be

better tailored to address the unique challenges faced by international students." (Student 1, 2nd-year student)

S3 also emphasized the role of these services in their adaptation process, noting the benefits of language support classes, academic tutoring, and counseling:

"*The university provides several support services for international students, which have been helpful in my adaptation process. These include language support classes, academic tutoring and counseling services.*" (Student 3, 2nd-year student)

However, students expressed mixed feelings about the university's responsiveness to their specific needs. S4 mentioned:

"*Yes, I feel the university is responsive to the needs of international students. They provide dedicated resources like the international student office, language support and guidance on adjusting to academic life.*" (Student 4, 2nd-year student)

S9 felt that the university was not responsive enough, though they did not provide specific reasons for their dissatisfaction:

"*I don't think the university is responsive enough to the specific needs of international students. I don't know why.*" (Student 9, 3rd-year student)

Financial challenges were common among international students, particularly in relation to tuition fees and living expenses. S6 shared:

"*Yes, managing tuition fees and living expenses has been challenging, especially being an international student. My family has made significant sacrifices to support my education, and I strive to ensure that their efforts are worthwhile.*" (Student 6, 3rd-year student)

S10 also found the same challenge in regarding of balancing tuition costs and living expenses, stating:

"*Yes, I have faced financial challenges managing tuition and living expenses. Although the cost of living in Vietnam is relatively lower than in many other countries, unforeseen expenses can make budgeting tight.*" (Student 10, 3rd-year student)

Everyday challenges related to housing, transportation and healthcare were also reported. S8 explained the difficulties in finding affordable housing close to the university and navigating Vietnam's healthcare system due to language barriers and unfamiliar procedures:

"*Yes, I've faced a few practical challenges, particularly with housing and healthcare. Finding affordable housing close to the university can be difficult, and navigating healthcare in a foreign country has been challenging due to language barriers and unfamiliar systems.*" (Student 8, 2nd-year student)

Similarly, S11 noted that transportation was a significant challenge, saying the inconvenience of public transit and the difficulty of adjusting to Vietnam's traffic conditions:

> "*Transportation is a challenge, as public transit options are not as convenient or reliable as I'm used to, and getting used to local traffic took time.*" (Student 11, 2nd-year student)

4.2. Strategies Employed for Coping Challenges
4.2.1 Academic Coping Strategies
The analysis of interviews with international medical students studying in Vietnam revealed a range of coping strategies employed to overcome academic and personal challenges. These strategies, both academic and socio-emotional, significantly influenced the students' personal development, developing resilience, independence and intercultural competence. S1 noted:

> "*I rely on a structured schedule, time management and clear goal-setting to stay on track. Regular self-care practices like fitness and mindfulness help me maintain a healthy balance.*" (Student 1, 2nd-year student)

Self-study emerged as a common strategy, often supplemented by peer support. S5 highlighted the importance of independent learning and social engagement:

> "*My coping strategy is to self-study, form proper relationships with lecturers, officials, students and local people. Work hard and enjoy.*" (Student 5, 2nd-year student)

This independent learning approach was complemented by collaborative study groups, which provided both academic support and social interaction. S7 noted how peer interactions facilitated knowledge-sharing and comprehension:

> "*Peer study groups have been particularly helpful for collaborative learning, allowing us to clarify concepts and share different perspectives.*" (Student 7, 3rd-year student)

Language barriers posed additional academic and clinical challenges, prompting students to engage in language learning activities. S3 described their efforts to learn Vietnamese for better interactions with locals and patients:

> "*I've been learning basic Vietnamese to better communicate with locals and understand clinical settings. I also practice medical terms in Vietnamese to improve patient interactions.*" (Student 3, 2nd-year student)

To navigate the social and emotional challenges of living abroad, students adopted strategies aimed at building connections and managing stress. Many emphasized the importance of forming supportive networks with fellow international students and local peers. S6 remarked:

> "*I've made an effort to attend university events, interact with other international students, and engage with local communities to enhance my social integration.*" (Student 6, 3rd-year student)

These results suggest that self-directed learning, peer collaboration, and language acquisition were key tactics that promoted international students navigate the linguistic and academic challenges of the EMI medical program.

4.2.2 Social and Cultural Adaptation Strategies
Adaptability and cultural sensitivity were crucial in overcoming cultural differences. S4 described their proactive approach to embracing new cultural norms, stating:
> "*Being open to new cultural norms and learning from my surroundings has helped me integrate better and navigate challenges smoothly.*" (Student 4, 2nd-year student)

Additionally, seeking help from university resources, such as counseling services and academic advisers, provided critical support during times of stress.

The international student experience in Vietnam significantly contributed to personal growth, with students reporting increased resilience, independence and intercultural competence. S8 explained how learning abroad had helped them to develop their independence and resourcefulness:
> "*Surviving in a foreign country without the help and full support of my parents has taught me to be more independent and resourceful.*" (Student 8, 2nd-year student)

Resilience was often developed through overcoming academic and personal challenges. S9 emphasized how navigating multiple challenges had strengthened their ability to remain focused under pressure:
> "*Facing academic, financial and practical challenges has strengthened my ability to remain focused and solve problems under pressure.*" (Student 9, 3rd-year student)

This resilience was closely linked to the development of adaptability, as students learned to adjust to new environments and unfamiliar situations. Intercultural competence was another key outcome, created through daily interactions with diverse cultural groups. Students highlighted several key skills and life lessons gained from their experiences. Adaptability, time management and effective communication were frequently mentioned. This sentiment was echoed by S13, who stated:
> "*Living and studying in a different culture fosters cultural sensitivity and adaptability. Students learn to navigate cultural differences, communicate effectively with people from diverse backgrounds, and appreciate different perspectives.*" (Student 13, 3rd-year student)

S11 reflected on the key skills they had acquired:
> "*I've learned how to adjust to a new cultural environment, manage my time efficiently and improve my communication skills.*" (Student 11, 2nd-year student)

Moreover, some students described how their challenges shaped their mindset, making them more resilient and appreciative of small achievements. S12 shared:

> "*I have learned to survive at the lowest, which has made me more resilient and appreciative of small successes.*" (Student 12, 2nd-year student)

The coping strategies used by international medical students in Vietnam enabled them to manage both academic and personal difficulties and enhanced important growth at the personal and professional levels. The resilience, adaptability, along with the intercultural understanding developed in these students will have an enduring impact on their future work.

4.3. Suggestions for Program Improvement
Through analysis of the students' feedback, several key areas for improvement emerged, including academic quality, student support services and the overall learning environment.

4.3.1 Academic Support
A major concern was the need for specialized language courses, particularly in Vietnamese medical terminology, to support clinical rotations. As S3 suggested:
> "*Providing more targeted language assistance, such as workshops for medical terminology and advanced English for academic writing, would greatly help.*" (Student 3, 2nd-year student)

Additionally, students recommended faculty training in cultural sensitivity to improve teaching effectiveness and classroom engagement. As S4 stated:
> "*Professors who understand cultural differences can create a more supportive classroom environment.*" (Student 4, 2nd-year student)

4.3.2 Social, Cultural and Mental Health Support
Students recommended comprehensive orientation sessions that cover academic expectations, cultural integration and practical matters like healthcare and housing. S5 noted:
> "*Enhanced orientation programs would help students adapt quickly to both academic and social environments.*" (Student 5, 2nd-year student)

Another significant recommendation was the introduction of peer mentorship programs, in which local students support foreign students in overcoming social and intellectual obstacles. S7 emphasized the value of such support, stating:
> "*Having a mentor who understands both the academic and cultural context can be invaluable.*" (Student 7, 3rd-year student)

Alongside mentorship, students highlighted the need for expanded mental health resources, including workshops on stress management, homesickness and access to counseling services. As S8 shared:
> "*A well-structured mental health support system would ease the adjustment process for many students.*" (Student 8, 2nd-year student)

To enhance inclusivity and cross-cultural understanding, students suggested initiatives such as cultural festivals, language exchange programs and social mixers to encourage interactions between international and local students. S2 mentioned:

"Participating in cultural activities helped me connect with both local and international peers." (Student 2, 2nd-year student)

4.3.3 On-Campus Housing and Career-Related Support
Practical challenges, such as housing and financial stress, were also frequently mentioned. Students expressed the need for affordable on-campus housing options and centralized housing services to facilitate a smoother transition. S9 remarked:

"Providing more affordable on-campus housing options would make the transition smoother." (Student 9, 3rd-year student)

In addition, career-related support, such as internship placements and career counseling services, was seen as essential for professional development. S11 stated:

"Internship placement services and career counseling would provide practical experiences and help with future career pathways." (Student 11, 2nd-year student)

Collaborative activities, such as group projects and academic partnerships, were also seen as beneficial in cultivating a sense of community. S6 explained:

"Group activities with local students helped me feel more integrated into the university community." (Student 6, 3rd-year student)

Drawing from their personal experiences, students provided practical advice for future international students to help them adapt successfully to the medical EMI program. Many emphasized the importance of learning basic Vietnamese, particularly for clinical settings. S1 advised:

"Even though the program is in English, knowing basic Vietnamese medical terms will enhance your communication with patients." (Student 1, 2nd-year student)

Adaptability and openness to cultural differences were also highlighted as key to success. S3 suggested:

"Embrace cultural differences — they will enrich your experience both personally and academically." (Student 3, 2nd-year student)

Additionally, students stressed the importance of building strong support networks with peers, mentors and faculty members. S5 shared:

"Having a strong support network made my transition smoother." (Student 5, 2nd-year student)

Finally, students highlighted the need for effective time management to handle the rigorous academic workload. They advised future cohorts to plan their schedules and seek help when needed. S9 noted:

"Managing your time efficiently is key to balancing academics and personal life." (Student 9, 3rd-year student)

Engaging in extracurricular activities was recommended as a way to relieve stress and build lasting friendships. S7 remarked how joining student organizations in nurturing their feeling of inclusion:

> *"Joining student organizations helped me feel more connected to the university community."* (Student 7, 3rd-year student)

These insights from international students provide valuable recommendations for enhancing the medical EMI program. Addressing these concerns — through enhanced language support, mentorship programs, mental health resources, career services and cultural integration initiatives — can greatly enrich both the academic and social experiences of incoming international learners.

5. Discussion
International medical students in Vietnam's EMI programs experienced a range of academic and language-related obstacles align with existing literature on transnational higher education. The primary academic difficulty identified by many participants was the complexity of medical terminology and dense content. This reflects Wilkinson's (2012) findings that medical students — particularly those without prior exposure to specialized jargon — often face challenges with terminology derived from Latin and Greek roots.

The cognitive load imposed by such terminology is exacerbated in EMI contexts, where students simultaneously process new content and navigate a non-native language (Airey, 2012). This dual burden was evident in participants' experiences with lectures, textbooks and assignments, where fast-paced delivery and limited interactive opportunities hindered comprehension. Similar to findings by Doiz and Lasagabaster (2020), students reported that lecture styles emphasizing rote memorization, coupled with minimal classroom engagement, impeded deep learning. Adjusting to new teaching methodologies posed another challenge, especially for students from educational backgrounds rooted in traditional didactic approaches. This adjustment period not only affects academic performance but also contributes to feelings of academic insecurity and anxiety (Makeeva et al., 2021). SDT (Ryan & Vansteenkiste, 2023) helps explain why these challenges impact student engagement and learning outcomes.

Students who struggled with competence (i.e., their perceived ability to master medical concepts in English) were more likely to experience academic anxiety and self-doubt. Additionally, the lack of autonomy — as many students had to adjust to unfamiliar pedagogical approaches — may have reduced their motivation to engage actively in the learning process. Furthermore, limited relatedness due to language barriers likely contributed to feelings of isolation, as students found it difficult to build strong academic and social networks.

Language barriers further compounded these academic challenges. While EMI aims to facilitate content learning in English, the reality is that many students face difficulties with academic English proficiency, including writing, speaking, and listening comprehension (Galloway & Rose, 2015). These language-related issues extended to social interactions, affecting peer relationships and limiting

opportunities for collaborative learning, thus reinforcing the isolation often reported by international students (Hofhuis et al., 2023; Makeeva et al., 2021; Sawir et al., 2008). Resilience Theory (Masten, 2014) provides a useful lens to understand how students navigate and overcome these challenges.

Students who demonstrated higher resilience—by actively seeking support, practicing language skills and adapting to new learning environments—were more likely to persist and succeed despite initial difficulties. This suggests that resilience plays a critical role in student adjustment, particularly in EMI programs where language and academic challenges intersect. Moreover, the impact of language barriers on clinical practice cannot be overlooked. Effective communication with patients is crucial in medical education, and limited proficiency in the local language impedes this aspect, as supported by Hull (2016), who emphasized the importance of language skills in professional healthcare settings. Students with higher autonomy (SDT) and resilience were more likely to proactively engage in language learning efforts—such as learning basic Vietnamese for clinical interactions—highlighting the interplay between motivational and psychological factors in student adaptation.

Findings of this study highlighted the diverse coping strategies employed by international medical students in Vietnam to navigate academic, linguistic and socio-cultural challenges. These strategies reflected both individual resilience and the dynamic processes through which students adapted to EMI environments. Consistent with existing research, students relied heavily on self-directed learning, peer support networks, and time management techniques to manage academic demands (Brunsting et al., 2021; Sawir et al., 2008). The emphasis on peer support resonates with the work of Tran and Pham (2016), who highlighted the role of peer networks in facilitating both academic success and emotional well-being among international students. Language barriers emerged as a significant challenge, particularly concerning medical terminology and classroom communication. Students' proactive language learning strategies, including the use of translation apps and participation in language support programs, are consistent with findings from Evans and Morrison (2011), who identified language acquisition as both an academic necessity and a coping mechanism. Furthermore, the effort to acquire basic Vietnamese for clinical interactions underscores the importance of contextual language skills in healthcare settings, as noted by Wilkinson (2012).

This study offered new perspectives into the various challenges and adaptive strategies of international medical students in Vietnam's EMI programs. Unlike previous studies that often generalized international student experiences, this research highlights the interplay between academic demands, language barriers and cultural adaptation within a medical context. A key contribution is the identification of learning a language not just as an academic tool but as a critical component of clinical competence and social integration. Additionally, the emphasis on mental health support and the proactive role of students in seeking peer and institutional support reflects a shift toward more holistic coping mechanisms. The findings underscored the importance of culturally responsive

pedagogy and institutional support systems tailored to the unique needs of international medical students, offering valuable implications for policy and practice in global higher education.

The comparison between second- and third-year international medical students in Vietnam's EMI program revealed distinct patterns in their academic, linguistic and socio-cultural challenges. Second-year students primarily grappled with foundational academic difficulties, such as mastering complex medical terminology and adapting to new teaching methodologies, alongside language barriers that hindered comprehension of lectures and assignments. In contrast, third-year students, who had more exposure to clinical settings, emphasized challenges related to practical application, including the need for hands-on training and deeper engagement with faculty during clinical rotations. While language barriers remained a concern for both groups, third-year students showed greater confidence in using English for professional communication but continued to face issues with Vietnamese accents during lectures. Socially, third-year students exhibited stronger integration into university life through collaborative projects and peer networks, whereas second-year students focused on overcoming initial cultural adjustments. These differences suggested the need for tailored support systems that address the evolving academic, linguistic and social needs of international students as they progress through their studies.

Based on the results of this study, several important suggestions emerged to enhance the social and academic experiences of foreign medical students in Vietnam's EMI programs. First, the implementation of specialized language support, particularly in Vietnamese medical terminology, is critical for improving students' clinical communication and academic performance, aligning with the research of Evans and Morrison (2011) on targeted language instruction in EMI contexts. Tailoring this support to different academic levels could address the distinct needs of second- and third-year students, with foundational support for newer students and more advanced clinical communication training for those in later years. Second, the development of comprehensive orientation programs that address both academic expectations and cultural integration could facilitate smoother transitions (Bowles & Murphy, 2020; Kim, 2017). Additionally, establishing peer mentorship programs could encourage stronger academic and social networks, providing international students with guidance and a sense of belonging. Third-year students, who have adapted better to the environment, could serve as mentors for second-year students to share coping strategies and academic advice. Mental health support services tailored to the unique challenges faced by international students are also essential, reflecting the growing recognition of mental health as a key component of student well-being in global education (Brunsting et al., 2021; Young et al., 2013). Moreover, promoting cultural exchange activities and faculty training on cultural sensitivity can create a more inclusive learning environment, enhancing cross-cultural understanding and reducing feelings of isolation. Importantly, addressing the limitation of lecturers' intercultural competence in teaching international students is crucial (Huynh et al., 2024). Many participants highlighted challenges related to communication gaps and a lack of culturally responsive teaching methods,

underscoring the need for professional development programs that equip faculty with skills to effectively engage diverse student populations (Quoc Lap et al., 2024). Additionally, the findings suggested the necessity for differentiated institutional support based on students' academic levels—second-year students require foundational academic guidance, while third-year students benefit more from advanced clinical engagement and career preparation. Finally, increasing opportunities for hands-on clinical practice and career development workshops can enhance students' preparedness for professional success, bridging the gap between theoretical knowledge and practical application. These recommendations highlighted the need for a holistic approach that addresses academic, social and emotional dimensions, ultimately cultivating a more supportive and inclusive environment for international medical students at varying stages of their educational journey.

Though this study offers valuable insights into the challenges and adaptation strategies of international medical learners in Vietnam's EMI program, it has several limitations. The extent to which these findings can be generalized might be constrained by the small sample size and the focus on a single university, suggesting the need for future research across many institutions. Similarly, the reliance on self-reported experiences through interviews introduces potential recall bias, which could be mitigated by incorporating longitudinal studies or mixed-method approaches, such as classroom observations and academic performance tracking. This study also did not examine faculty perspectives on supporting international students, an area that upcoming study could explore to offer a more holistic understanding of institutional challenges and improvements. Furthermore, given the increasing role of digital learning in EMI education, future research should investigate the impact of technology, including AI-driven language support and hybrid learning environments, in boosting international students' achievements and their integration into social community.

6. Conclusion
This study shed light on the diverse challenges and adaptive strategies of international medical students in Vietnam's EMI programs. Findings revealed that students grapple with academic difficulties, language barriers, cultural adaptation and limited institutional support, particularly in areas such as language assistance and culturally responsive teaching. Despite these challenges, students demonstrated resilience through self-directed learning, peer support and proactive coping strategies, which led to personal growth, intercultural competence and academic success.

The study also highlighted the critical need for universities to enhance academic support services, improve orientation and mentorship programs, and address the limitations of lecturers' intercultural competence to cultivate a more inclusive academic setting. By emphasizing both the individual and institutional dimensions of student adaptation, this research offers meaningful perspectives on the complex experiences of international students in non-Western EMI contexts and offers practical recommendations for improving support systems in medical education globally.

7. Acknowledgments

8. References

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Appendix A: Interview Protocol

Title of Study:
"Navigating Medical Education through English in Vietnam: Challenges and Coping Strategies of International Students"

Interview Objective:
To explore the academic, linguistic, cultural, and social experiences of international students enrolled in an English-Medium Instruction (EMI) medical program in Vietnam, and to understand their adaptation strategies and recommendations for program improvement.

Section 1: Background and Demographics
1. Could you briefly introduce yourself (name optional), your year of study, and where you are from?
2. What motivated you to choose Vietnam for your medical education?
3. Had you previously studied in an EMI environment before enrolling in this program?

Section 2: Academic and Linguistic Experiences
4. How would you describe your academic experience in this EMI program so far?
5. What academic challenges have you encountered, particularly in understanding course content or assessments?
6. Have you experienced difficulties related to language use—such as understanding lectures, textbooks, or participating in discussions?
7. How do you manage medical terminology and assignments in English?
8. How confident do you feel when using English for academic tasks (e.g., exams, clinical work, group discussions)?

Section 3: Cultural and Social Adaptation
9. What were some cultural differences you noticed upon arriving in Vietnam that affected your studies or daily life?
10. How would you describe your interactions with local students and professors?
11. Do you feel included in the university's academic and social environment? Why or why not?

Section 4: Institutional Support and Practical Matters
12. What kinds of support services (e.g., language help, counseling, orientation) has the university provided? Were they helpful?
13. Have you faced challenges related to housing, finances, transportation, or healthcare while studying here?
14. Is the university responsive to international students' needs? Could you provide an example?

Section 5: Coping Strategies and Personal Growth
15. How have you coped with the challenges you've encountered?
16. What personal skills or qualities have you developed since joining this EMI program?

17. Have you received help from friends, mentors, or university staff in adapting to your new academic and social environment?

Section 6: Program Evaluation and Recommendations

18. What do you think the university could do to improve the EMI medical program for future international students?
19. Are there specific changes you would suggest in terms of teaching methods, faculty training, or student support?
20. If you could give advice to new international students enrolling in this program, what would you say?